ABSTRACT

THE INFLUENCE OF OUTREACH MODE COUNSELING TOWARD NUTRITIONAL STATUS CHANGE ON 6 – 24 MONTHS OLD CHILDREN

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**Background:** Insufficient knowledge of food and health will lead to inadequate food intake and high infection risk, especially diarrhea and Upper Respiratory Tract Infection (URTI). Improvement of knowledge can be achieved by counseling. There are several mode of counseling, one of them is outreached mode.

**Purpose:** This study aimed is to analyzed the influence of outreach mode counseling toward the change of nutritional status 6 – 24 months old children.

**Research Method:** Research design was Quasi Experiment with non randomized pre post test control group. Intervention group recieved outreach mode counseling by outreach nutritionists (Tenaga Gizi Pendamping) and control group recieved conventional counseling from nutritionists of primary health care center (Tenaga Gizi Puskesmas). The study was done in Makassar City, South Sulawesi Province. Working area of Sudiang Raya’s Primary Health Care was chosen as intervention area and Bira’s Primary Health Care as control site. Subjects were children aged 6 – 24 months with WAZ between -3 until 0 SD. The number of subjects in intervention group were 32 and control were 37 children. The observation variables were changes of mother’s knowledge, energy adequacy level, protein adequacy level, diarrhea and ARI duration and nutritional status (WAZ, HAZ and WHZ) of children. Data were analyzed by comparison test’s between two groups and multivariats analyses by linear regressions.

**Result:** After 3 months of intervention, there increase in mother’s knowledge, energy adequacy level, and the decrease of duration Diarrhea was higher in the outreached mode counseling group than the control group. The decrease of WAZ and HAZ in outreached counseling group were lower than control group, there was an increase in WHZ in outreached counseling group but there was a decrease in control group.

**Conclusion:** Outreach counseling intervention model is more effective than conventional counseling in lowering the decrease of nutritional status on 6 – 24 months old children

**Key words:** Outreach mode counseling, nutritional status, 6 – 24 months old children.